

2/21/2022

Dear Chair Utke and Committee Members,

On behalf of the Minnesota Nurses Association (MNA), I write you to share my experience in getting licensed in the state of Minnesota to demonstrate why it is unnecessary and harmful to pass S.F. 2302, to authorize Minnesota to enter the National Nurse Licensure Compact.

For much of my career, I was a licensed registered nurse in North Dakota. However, I accepted the position of Nurse Educator and decided to move across state lines to become licensed in Minnesota. Overall, my process was quite easy as Minnesota has reciprocity with North Dakota for nurse licensure. I applied by endorsement since I had my license in another state, I did not have to retake the nurse licensure exam. I very quickly received a temporary license until my full license was approved.

To get my license approved, I had to be fingerprinted and have a background check completed. I learned the Minnesota Board on Nursing was a little behind in processing these pieces and I had to call a few times to request that they approve my license. Otherwise, the process was easy to navigate. As a nurse coming into the state with employment, I found myself, I had to pay for the background check, fingerprints, and applications, but the cost was under \$200.

Due to the differences in state requirements, I do need to complete additional continuing education requirements and my license is only valid for one year. However, it's only 12 additional contact hours and I look forward to the opportunity for further learning and advancing my nursing knowledge. As a licensed registered nurse and nurse educator, I believe it is vital that nurses are as educated and prepared as possible to meet patient needs.

I have deep concerns about Minnesota becoming a compact state. Why would we lower MN standards to enter a rigid, federal compact that does not put Minnesotans first, especially when data from the Minnesota Board on Nursing shows that we train more than enough nurses to meet our needs as a state. We need to invest in our Minnesota workforce instead of allowing nurses to practice in the state without going through the process to ensure they are qualified and capable to provide care to our family, friends, and community.

Thank you for your time and consideration,

Hattie Idalski, RN